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AUTHOR Yarborough, Ralph
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ABSTRACT

This Senate report recommends certain technical and clarifying amendments to H.R.11702. As reported, H.R.11702 would extend for three years the current program to provide financial assistance for the construction of health library facilities; to support training of health librarians and other information specialists; to expand and improve health library services through the provision of grants for library resources; to support projects of research and development in the field of health communications, and related special scientific projects; to support the development of a national system of regional medical libraries; and to support selected biomedical scientific publications projects. This bill would increase the total authorization for funding for these programs frcm the current $21 million per year to $25 million in fiscal year 1971, $30 million in fiscal year 1972, and $35 million in fiscal year 1973. (Author/MF)

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Report - Senate - 91-480

MEDICAL LIBRARIES AND HEALTH COMMUNICATIONS ASSISTANCE AMENDMENTS OF 1969;

OCTOBER 16, 1969.—Ordered to be printed.

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Mr. YARBOROUGH, from the Committee on Labor and Public Welfare, submitted the following

REPORT

[To accompany H.R. 11702]

The Committee on Labor and Public Welfare, to which was referred the bills (S. 2549, S. 2239, and H.R. 11702) to amend the Public Health Service Act to improve and extend the provisions to provide for a program of assistance for medical library and other health information services and facilities, and for related purposes, having considered the same, reports favorably on H.R. 11702 with an amendment in the nature of a substitute and recommends that the bill as amended do pass.

SUMMARY

H.R. 11702 would extend for 3 years the current program to provide financial assistance for the construction of health library facilities; to support training of health librarians and other information specialists; to expand and improve health library services through the provision of grants for library resources; to support projects of research and development in the field of health communications, and related special scientific projects; to support the development of a national system of regional medical libraries; and to support selected biomedical scientific publications projects. This bill would increase the total authorization for funding for these programs from the current $21 million per year to $25 million in fiscal year 1971, $30 million in fiscal year 1972, and $35 million in fiscal year 1973. In addition, certain technical and clarifying amendments are proposed.

BACKGROUND

The programs of support which H.R. 11702 would extend and amend are authorized by the Medical Library Assistance Act of 1965 (Public

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Law 89-291), which this committee also endorsed following its consideration of S. 597 in June 1965.

The expanded authorities and resources provided by the Medical Library Assistance Act have permitted the National Library of Medicine to initiate coordinated programs of support for health libraries and health information service and research activities. The committee believes that these programs have already begun to ameliorate the serious shortages of health information facilities and resources, manpower, and technological development which concerned the Congress at that time.

Hearings

At hearings held before this committee on July 31, 1969, all witnesses with the exception of the Department of Health, Education, and Welfare, urged the extension of these valuable programs for a longer period than the 1 year and emphasized the need for adequate funding if the objectives of the program are to be achieved. The committee agrees that major health library deficits remain to be corrected and that new demands caused in part by the creation and development of new Federal health programs further urge an expanded and creative outlook upon such programs of assistance. Taking into account the progress which has been made and the continuing and new problems which do exist in the area of health communications and information services, the committee has given favorable consideration to H.R. 11702, as reported.

The Problem

The September 20, 1965, report of this committee to accompany S. 597 summarized briefly the scope of the health information service deficits which faced the United States at a time when there was increasingly sharp focus on the health needs of this country and the magnitude of the resources which would have to be gathered to meet those needs. Witnesses reported that over $100 million would be needed for construction of medical school libraries alone to provide adequate space for documents, staff, and readers. An equal sum was then required to bring medical library collections up to desired standards. There was also a critical shortage of professional personnel trained to meet the special needs of health science libraries and the medical communities they serve.

The Medical Library Assistance Act of 1965 permitted a good beginning toward the solution of health information problems. By improving and strengthening health libraries the Act has assisted faculties, students, and practicing physicians to keep more fully informed on research findings and new developments in the field of medicine and allied subjects. Ultimately, this has meant better health care for the American people. However, the committee is impressed by the magnitude of the problems which remain. The complexity and the mass of health information produced by our advanced scientific society have outstripped our ability to store, retrieve, and deliver information in useable form to the people who need it.

At the frontier of interdisciplinary research, traditional information services are no longer adequate. New ways of organizing and presenting information must be developed. Particularly at the educational

frontier where students must learn so much in so little time, modern technologies for information transfer must be employed. The committee believes that only through the development and utilization of the most sophisticated approaches to transmitting health information can new medical knowledge be communicated from the "leading edge" of medical research to those who minister daily to the Nation's health in hospitals, medical offices, clinics, and other places where illnesses are diagnosed and treated.

Under the Medical Library Assistance Act of 1965 $70 million was authorized for fiscal years 1966–69 for the seven programs funded under this legislation. A total of $34 million has been appropriated for these programs during that time. Witnesses testifying in behalf of extension of the Act have expressed concern over the discrepancy between the magnitude of the need, the level of authorization provided under the original legislation, and the limited appropriations which have been provided to date.

A fair appraisal would be that the act has fallen short of its objectives. One reason is that appropriations have totaled less than half of the funds authorized. Further, what was adequate in 1965 is not adequate in 1969. It will be even less so in the 1970's. Two specific instances of cost increases which confront health libraries are the higher prices of subscription to health journals, and staff salaries. In the past 10 years the costs of medical periodicals have almost doubled; costs of medical books have risen over 50 percent. Librarians' salaries, which have never been high and are not adequate now, have nevertheless risen by an estimated 25 to 30 percent in the past 5 years.

Without continued and expanded support as recommended in this bill, our health information problems can only worsen. On the basis of current progress and future plans, it is estimated that over 10,000 physicians will graduate from medical school in 1975, an increase of one-third over the present yield. Leaders in other health professions are also preparing for greatly expanded personnel requirements in the next decade. All educational resources will need to be expanded to meet the instructional requirements of this growing community of health personnel, including health information resources such as medical libraries. As our Government exhorts health professional schools to educate and train more personnel it must provide the library resources to assist in this process.

The Medical Library and Health Communications Assistance Amendments of 1969 will not resolve all the needs and problems in health communications. They will, however, provide significant assistance where needed and stimulate the formulation and adaptation of new ideas and new concepts for making health information available. To provide stability in the recruitment and retention of personnel in this field, the committee believes a 3-year period of assistance will be required.

Recommended Program

Summary of provisions

H.R. 11702 as reported would extend for 3 years the programs authorized by the Medical Library Assistance Act of 1965. The committee is convinced that the objectives of the Medical Library Assistance Act remain valid for current and future national health informa-

tion needs, and H.R. 11702 would propose no change in these objectives. It would permit a higher level of expenditure toward these objectives. An important committee amendment would permit the Secretary to transfer funds under specified limitations within the authorization permitted by this act. This will assure that the congressional responsibility for program authorization is retained, while permitting a more flexible administration of the programs. Other amendments proposed are intended to increase the efficiency and responsiveness of these programs of assistance.

For the construction assistance program the bill would increase the authorization ceiling from $10 million to $11.5 million in fiscal year 1971, $14 million in fiscal year 1972, and $16.5 million in fiscal year 1973 for new health library construction and for projects to renovate and expand existing health library space. It would make two changes in the law, to provide that funds for construction remain available until expended and to delete the present authority which permits awards in the absence of the required 25 percent non-Federal contribution.

For the program to train health librarians and other information specialists for administrative, service, and research positions, the bill fould increase the authorization for the support of training grants and fellowships from $1 million to $2 million in fiscal year 1971, $2.5 million in fiscal year 1972, and $3 million in fiscal year 1973.

H.R. 11702, as reported, would combine the two sections of the Medical Library Assistance Act which authorize special scientific projects and research and development in order to emphasize the focus of both these programs on scholarly activity and research to advance health communications. For special projects, this bill proposes that the term "grant" be substituted for "fellowship", in recognition of the research orientation of such projects, and proposes that such awards be authorized to institutions as well as to individuals. For the research program, authority would be added to permit the support of demonstration projects for new techniques, devices, or systems which are ready for application.

For the program to provide library resource grants the bill would increase the authorization for funding from $3 million to $4 million in fiscal year 1971, $5 million in fiscal year 1972, and $6 million in fiscal year 1973. It would also provide authority to establish new collections and would delete the provisions of the current Act which require that grants for health library resources be in amounts determined on the basis of the library's budget and that the grant once awarded be reduced in amount for each subsequent year of support. A requirement would be added for assurance of continuing local support during and after the period of Federal assistance.

The authorization for the regional medical library program would be increased from $2.5 million per year to $3 million in fiscal year 1971, $4 million in fiscal year 1972, and $5 million in fiscal year 1973. In addition to provision of library services the bill would authorize support of planning and data gathering activities, essential to the development of sound regional medical library programs, by the participating institutions and individuals; it would permit the designated grantee library for such a program to provide necessary resources to

other libraries which cooperate in the program; and it would delete an ambiguous criterion for award contained in the current act. This bill would also permit the selective use of the contract mechanism, as well as grants-in-aid, to support specific regional services.

For the program to support biomedical scientific publications projects, this bill would authorize $1 million per year during the 3 years of the extension, the present level.

Factors considered by the committee

The committee weighed carefully the administration's request, reflected in S. 2239, that the current program be extended for 1 year only. The witnesses who testified before this committee on July 31, 1969, as well as action of the House of Representatives and the report of the House Committee on Interstate and Foreign Commerce with respect to H.R. 11702, clearly support the position of this committee that a longer period of extension is entirely justified.

H.R. 11702, as reported, would add "health communications" to the title under which these programs are gathered. Eligibility for participation in the programs authorized by the Medical Library Assistance Act has always been intended to include all appropriate public and private institutions and individuals active in the provision of health services or in health related teaching and research, within the provisions of the law, and the terms used in this act are defined accordingly. While the intent of the act was broad, and its programs have been implemented accordingly, the committee accepted the value of added emphasis to this concept. The term "health communications" in the title of H.R. 11702 is an appropriate indicator of the broad intent of the program. The committee expects these programs to extend eligibility for participation to all clinical fields including medicine, dentistry, optometry, pharmacy, osteopathy, veterinary medicine where relevant to human health, nursing, public health, other health-related fields, and fundamental and applied sciences when related thereto.

The committee preferred the program-by-program authorizations for Federal support proposed in S. 2549 and H.R. 11702 to the single, nonspecific appropriation authority contained in S. 2239, for two reasons. First, the committee feels that it is useful to designate the level of the Federal contribution which would be desirable for these programs, as guidance for their implementation, at the same time allowing some program flexibility through limited authorization for transfer of funds among programs. Secondly, the committee endorses the original concept of the act, to provide coordinated assistance for all areas of need through balanced support for each of the seven programs.

H.R. 11702, as amended by the committee, increases the authorization for Federal support for four of the seven programs. In the opinion of the committee, those programs which contribute to improved facilities and resources and manpower and which help to provide better access to existing centers for health information services should be supported at substantially higher levels than heretofore. During the initial years, policies and procedures have been developed and tested, and expansion of the Federal contribution is now justified.

The level of support wasn't increased for scientific and technical publications which help expand the production of aids to information searching, such as indexing, abstracting, and other reference aids. No

increase in funding was provided for the special projects and research programs; such support should be highly selective, with emphasis on contemporary health problems, such as drug abuse and alcoholism.

In summary, S. 2549 would authorize a moderate increase in funding. The committee judges that the level of support is commensurate with the demonstrated needs which must be met. The committee based its acceptance of the funding levels on the following considerations:

Health library construction.—The Medical Library Assistance Act authorized $40 million for the 4-year period—fiscal 1967–70—for grants to public or private nonprofit agencies or institutions towards the cost of construction of any medical (health) library facility. The Federal contribution under this law may not exceed 75 percent of the necessary cost of construction. Section 393 of this act authorizes the construction of health library facilities per se, without reference to educational, teaching, or research functions. It is the only Federal construction program which can provide for medical library and information facilities needed for nonteaching, nonresearch institutions such as hospitals, clinics, community health service programs. Through fiscal 1970 the National Library of Medicine will have provided 11 construction grants for health school library construction, totaling $11.25 million. While the 330,000 net square feet of new library space provided by this small number of projects will have a considerable value to the Nation, the contribution from this and other Federal programs does not begin to meet the need identified in 1965 and since reaffirmed. For this reason the committee endorsed provisions to increase the yearly funding authorization from $10 million to $11.5 million in fiscal 1971, $14 million in fiscal 1972, and $16.5 million in fiscal 1973; to provide $42 million for construction, renovation, and expansion of health library facilities for the period July 1, 1970, to June 30, 1973.

Training in medical library sciences.—The Medical Library Assistance Act of 1965 authorized $1 million per year to support training grants and fellowships to train medical librarians and other much-needed information specialists. With the $4.5 million which has been appropriated the National Library of Medicine has established approximately 20 training programs. Some of these provide training opportunities for medical librarians; others explore new ways of training individuals to organize and utilize the new information-processing technology to apply it to health fields. Still others support training for research careers in information fields. During the initial years of this program some 300 individuals will have completed training. While this is an encouraging beginning it does not begin to meet the identified need. In 1965 there were approximately 6,000 medical libraries in the United States with fewer than 3,000 trained librarians or other appropriate persons to staff them. The committee endorsed provisions to increase the authorization ceiling to $1 million per year to $2 million in fiscal year 1971, $2.5 million in fiscal year 1972, and $3 million in fiscal year 1973, with the expectation that this program, now that it is well established, can expand to provide larger numbers of the skilled library and information personnel needed.

Special scientific projects and research and development.—The authorities for these programs under the Medical Library Assistance Act have permitted support and encouragement of useful projects to explore the needs and preferences of health workers for information serv-

ices and to encourage and support the development of new systems and techniques. The committee believes that a research program at the current level authorized, $500,000 per year for special projects and $3 million per year for research, development, and demonstration projects will permit an adequate level of activity, provided the funds are appropriated. The committee took note of the fact that, while $12 million was authorized for research and development during fiscal years 1966–69, only about $5.3 million was appropriated. It is the opinion of the committee that appropriated funds be used for contemporary health problems such as alcoholism, drug abuse, population control, and environmental health.

Grants for library resources.—The Medical Library Assistance Act authorizes $3 million a year for this program, which has received enthusiastic endorsement from witnesses testifying in behalf of H.R. 11702 and related bills. In its initial years of development, this mechanism has been shown to be an effective one for encouraging medical and other health libraries to acquire the documents, materials, staff, equipment, and systems to permit them to provide better services. However, the $9.7 million which has been appropriated and expended for such grants does not begin to approach the need, reported in 1965 as in excess of $100 million for medical library collections at that time. This program should be expanded. H.R. 11702 would provide for such expansion, authorizing $15 million during the 3-year period of the extension. At the same time the committee wishes to emphasize that expanded support through this program of grants for library resources should not replace local support for health libraries. H.R. 11702 retains the $200,000 ceiling on individual grants specified in the current act, and requires assurance of adequate continuing financial support for such libraries or instrumentalities during and after the period of Federal assistance. Related to this expansion, the bill would also provide authority to permit the establishment of new collections. With increasing emphasis upon continuing education of local health service personnel, such new information centers can contribute significantly to the information resources available for this crucial function.

Grants for regional medical libraries.—H.R. 11702 would increase the authorization for support for regional library service programs from $2.5 million to $3, $4, and $5 million per year, providing a total of $12 million for the 3-year period of the extension. The current authorization would have provided a maximum of $12.5 million for fiscal 1966–70. During fiscal 1966–69, $3.2 million was appropriated for regional library programs. The committee recognized that efforts to encourage and support the development of cooperative, coordinated programs to share information resources within large geographic regions of the United States is a complex task which would necessarily proceed slowly. Progress under the current legislative authority has been very encouraging; the response of the health library community in its voluntary efforts to work with this program has been enthusiastic. Eight of 10 planned grant-supported regional library programs have received their initial awards. This program has shown that it is possible by sharing library resources to improve the quality and speed of health information services to users of health information who are geographically remote from centers for such services. Such a system can also avoid the costly duplication of specialized or unusually com-

plete collections of health literature. Regional library programs can not only provide conventional library services but can also serve as catalysts to encourage and develop needed innovations and improvements to the kinds of services available to health practitioners.

With the expectation that the transition must soon occur to the provision of full regional library services, and that preparation for special efforts to reach geographically isolated health workers and their institutions will soon begin, it is evident that this program requires substantially greater support than that which has been available under the present law. Continuity of support is essential for this program. Extension of this authority for less than 3 years would, in the opinion of the committee, be detrimental to its effectiveness.

Other amendments provided by H.R. 11702 for this program would help to assure effective administration and improve the responsiveness of this program to the ultimate user of information services. Support of planning activities is particularly important since an accurate knowledge of the health information resources and needs of the region is the only sound base upon which to plan a realistic program which will meet local needs. H.R. 11702 would also permit the selective use of the contract mechanism for certain specific activities which require direct guidance by the National Library of Medicine, such as MEDLARS and other computer-based services.

Support of biomedical scientific publications.—The committee noted that one of the problems which led to passage of the Medical Library Assistance Act was the rapid, accelerating growth of the volume of health documents and information which had to be processed. The Congress recognized that simply to make primary health literature available as it is published is not enough to assure the efficient flow of vital information from its point of generation to the ultimate user. It is also necessary to categorize and analyze this literature and provide locating devices to make it possible for each health worker to find the information which meets his individual needs. Such locating devices include universal and selective abstracting and indexing services, and annual, updated, and critical reviews of the literature for specific subject areas. To encourage the support of such worthwhile activities, H.R. 11702 maintains the authorization for the selective support of health-related publications at $1 million per year or $3 million during the 3-year period of the extension.

Section-by-Section Analysis

Section 1.—This section provides that the act may be cited as the "Medical Library and Health Communications Assistance Amendments of 1969."

Section 2. Clarifying and technical amendments and declaration of policy and statement of purpose.—Amends clause (3) of subsection (b) of section 390 to authorize grants to public or nonprofit private institutions; amends clause (4) of such subsection to authorize demonstrations in the field of medical library science; amends clause (5) of such subsection to authorize establishment of regional collections under the resource grants program.

Assistance for construction of facilities.—Section 2(b)(1) amends section 393 of the Medical Library Assistance Act (42 U.S.C. 280b–3).

deletes reference from this section to award in the absence of matching funds. Section 2(b)(2) deletes authority for approval of applications for medical library construction when matching funds are not available.

Assistance to special scientific projects.—Section 2(c)(1) amends the heading of section 395 of such act (42 U.S.C. 280b–5) to reflect the combination of such sections with section 396, the new title to read "Assistance for Special Scientific Projects, and for Research and Development in Medical Library Science and Related Fields." Section 2(c)(2) substitutes "Secretary" for "Surgeon General" and changes the reference from "fellowships" to "grants"; and authorizes and adds authorization for such grants to be made to public or nonprofit private institutions on behalf of qualified individuals.

Research and development in medical library science and related fields.—Subsection 2(d) adds authority for the support of demonstration projects under the research and development program.

Grants for improving and expanding the basic resources of the medical libraries and related instrumentalities.—Subsection 2(e)(1) amends the heading of section 397 of such act (42 U.S.C. 280b–7) to read "Grants for Establishing, Improving, and Expanding the Basic Resources of Medical Libraries and Related Instrumentalities."

Subsection 2(e)(2) adds authority to establish new collections for this program.

Subsection 2(e)(3) deletes reference to levels of award on the basis of the library's annual budget and deletes the requirement for grants subsequent to the first year being in decreasing amounts; and requires assurance of adequate continuing financial support for such libraries or instrumentalities from other sources during and after the period for which Federal assistance is provided.

Grants for establishment of regional medical libraries.—Subsection 2(f)(1) provides authority under this program to support planning for services and activities.

Subsection 2(f)(2) provides authority for the grantee library to supplement the resources of cooperating libraries in the region.

Subsection 2(f)(3) deletes the requirement, under section 393(c)(2)(A) of such act, that in making a grant, priority must be based on need of the library.

Subsection 2(f)(4) adds authority to this section for use of the contract mechanism as well as grants. Subject to the same limitations as are provided in this section for grants.

Authorization of appropriation—Extension of duration.—Section 3(a) provides that funds appropriated for grants for construction shall remain available until extended.

Assistance for construction of facilities.—Subsection 3(b) provides an authorization of $11.5 million in fiscal 1971, $14 million in fiscal 1972, and $16.5 million in fiscal 1973.

Grants for training in medical library sciences.—Section 3(c) authorizes the appropriation of $2 million in fiscal 1971, $2.5 million in fiscal 1972, and $3 million in fiscal 1973.

Assistance for special scientific projects.—Subsection 3(d)(1) authorizes appropriations not to exceed $500,000 for any fiscal year during the period of the extension.

Subsection 3(d)(2) substitutes "Secretary" for "Surgeon General".

Research and development in medical library science and related

fields.—Section (3)(e)(1) authorizes not to exceed $3 million for any fiscal year during the period of the extension.

Section (3)(e)(2) substitutes "Secretary" for "Surgeon General".

Grants for improving and expanding the basic resources of medical libraries and related instrumentalities.—Section 3(f)(1) authorizes $3 million for fiscal 1971, $4 million for fiscal 1972, and $5 million for fiscal 1973.

Section 3(f)(2) substitutes "Secretary" for "Surgeon General."

Grants for establishment of regional medical libraries.—Section 3(g)(1) authorizes $3 million for fiscal 1971, $4 million for fiscal 1972, and $5 million for fiscal 1973.

Section 3(g)(2) substitutes "Secretary" for "Surgeon General."

Financial support for biomedical publications.—Section 3(h)(1) authorizes not to exceed $1 million for any fiscal year during the period of the extension for this section of the current act.

Section 3(h)(2) substitutes "Secretary" for "Surgeon General."

Transferability of funds.—Section (3)(i) authorizes the Secretary to transfer sums from one or more programs authorized by this act to one or more programs authorized by this act, except that the aggregate of the sums so transferred from any such amount shall not exceed 10 percent, the aggregate so transferred shall not increase any program by more than 20 percent, no transfer shall increase any program over the amount authorized for that year, and any sums transferred shall remain available for such purpose to the same extent as are funds which are specifically appropriated for such purpose for such year.

Redesignations.—Section 4 includes a series of technical changes made necessary by the other amendments in this bill.

Meaning of Secretary.—Section 5 defines the term "Secretary" to mean the Secretary of Health, Education, and Welfare.

Effective date.—Section 6 provides that the provisions shall take effect July 1, 1970, and shall be effective with respect to grants and contracts made after that date.

CHANGES IN EXISTING LAW

In compliance with subsection (4) of rule XXIX of the Standing Rules of the Senate, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italic, existing law in which no change is proposed is shown in roman):

PUBLIC HEALTH SERVICE ACT, AS AMENDED

* * * * * * *

TITLE III—GENERAL POWERS AND DUTIES OF PUBLIC HEALTH SERVICE

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[PART H] *PART I*—NATIONAL LIBRARY OF MEDICINE

PURPOSE AND ESTABLISHMENT OF LIBRARY

SEC. [371.] *381.* In order to assist the advancement of medical and related sciences, and to aid the dissemination and exchange of scientific and other information important to the progress of medecine and to the public health, there is hereby established in the Public Health Service a National Library of Medicine (hereinafter referred to in this part as the "Library").

FUNCTIONS OF THE LIBRARY

SEC. [372] *382.* (a) The Surgeon General, through the Library and subject to the provisions of subsection (c), shall—

(1) acquire and preserve books, periodicals, prints, films, recordings, and other library materials, pertinent to medicine;

(2) organize the materials specified in clause (1) by appropriate cataloging, indexing, and bibliographical listing;

(3) publish and make available the catalogs, indexes, and bibliographies referred to in clause (2);

(4) make available, through loans, photographic or other copying procedures or otherwise, such materials in the Library as he deems appropriate;

(5) provide reference and research assistance; and

(6) engage in such other activities in furtherance of the purposes of this part as he deems appropriate and the Library's resources permit.

(b) The Surgeon General may exchange, destroy, or otherwise dispose of any books, periodicals, films, and other library materials not needed for the permanent use of the Library.

(c) The Surgeon General is authorized, after obtaining the advice and recommendations of the Board (established under [section 373] *section 383*), to prescribe rules under which the Library will provide copies of its publications or materials, or will make available its

facilities for research or its bibliographic, reference, or other services, to public and private agencies and organizations, institutions, and individuals. Such rules may provide for making available such publications, materials, facilities, or services (1) without charge as a public service, or (2) upon a loan, exchange, or charge basis, or (3) in appropriate circumstances, under contract arrangements made with a public or other nonprofit agency, organization, or institution.

BOARD OF REGENTS

SEC. [373] *383*. (a) There is hereby established in the Public Health Service a Board of Regents of the National Library of Medicine (referred to in this part as the "Board") consisting of the Surgeons General of the Public Health Service, the Army, the Navy, and the Air Force, the Chief Medical Director of the Department of Medicine and Surgery of the Veterans' Administration, the Assistant Director for Biological and Medical Sciences of the National Science Foundation, and the Librarian of Congress, all of whom shall be ex officio members and ten members appointed by the President, by and with the advice and consent of the Senate. The ten appointed members shall be selected from among leaders in the various fields of the fundamental sciences, medicine, dentistry, public health, hospital administration, pharmacology, or scientific or medical library work, or in public affairs. At least six of the appointed members shall be selected from among leaders in the fields of medical, dental, or public health research or education. The Board shall annually elect one of the appointed members to serve as Chairman until the next election. The Surgeon General shall designate a member of the Library staff to act as executive secretary of the Board.

(b) It shall be the duty of the Board to advise, consult with, and make recommendations to the Surgeon General on important matters of policy in regard to the Library, including such matters as the acquisition of materials for the Library, the scope, content and organization of the Library's services, and the rules under which its materials, publications, facilities, and services shall be made available to various kinds of users, and the Surgeon General shall include in his annual report to the Congress a statement covering the recommendations made by the Board and the disposition thereof. The Surgeon General is authorized to use the services of any member or members of the Board in connection with matters related to the work of the Library, for such periods, in addition to conference periods, as he may determine.

(c) Each appointed member of the Board shall hold office for a term of four years, except that (A) any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed, shall be appointed for the remainder of such term, and (B) the terms of the members first taking office after the date of enactment of this part shall expire as follows: three at the end of four years after such date, three at the end of three years after such date, two at the end of two years after such date, and two at the end of one year after such date, as designated by the President at the time of appointment. None of the appointed members shall be eligible for reappointment within one year after the end of his preceding term.

(d) Appointed members of the Board who are not otherwise in the employ of the United States, while attending conferences of the Board or otherwise serving at the request of the Surgeon General, shall be entitled to receive compensation at a rate to be fixed by the Secretary of Health, Education, and Welfare, but not exceeding $75 per diem, including travel time, and while away from their homes or regular places of business they may be allowed travel expenses, including per diem in lieu of subsistence, as authorized by law (5 U.S.C. 73b–2) for persons in the Government service employed intermittently.

GIFTS TO LIBRARY

SEC. [374] *384*. The provisions of section 501 shall be applicable to the acceptance and administration of gifts made for the benefit of the Library or for carrying out any of its functions, and the Surgeon General shall make recommendations to the Secretary of Health, Education, and Welfare relating to establishment within the Library of suitable memorials to the donors.

DEFINITIONS

SEC. [375] *385*. For purposes of this part the terms "medicine" and "medical" shall, except when used in [section 373,] *section 383*, be understood to include preventive and therapeutic medicine, dentistry, pharmacy, hospitalization, nursing, public health, and the fundamental sciences related thereto, and other related fields of study, research, or activity.

LIBRARY FACILITIES

SEC. [376] *386*. There are hereby authorized to be appropriated sums sufficient for the erection and equipment of suitable and adequate buildings and facilities for use of the Library in carrying out the provisions of this part. The Administrator of General Services is authorized to acquire, by purchase, condemnation, donation, or otherwise, a suitable site or sites, selected by the Surgeon General in accordance with the direction of the Board, for such buildings and facilities and to erect thereon, furnish, and equip such buildings and facilities. The sums herein authorized to be appropriated shall include the cost of preparation of drawings and specifications, supervision of construction, and other administrative expenses incident to the work. The Administrator of General Services shall prepare the plans and specifications, make all necessary contracts, and supervise construction.

TRANSFER OF ARMED FORCES MEDICAL LIBRARY

SEC. [377] *387*. All civilian personnel, equipment, library collections, other personal property, records, and unexpended balances of appropriations, allocations, and other funds (available or to be made available), which the Director of the Bureau of the Budget shall determine to relate primarily to the functions of the Armed Forces Medical Library, are hereby transferred to the Service for use in the administration and operation of this part. Such transfer of property, funds, and personnel, and the other provisions of this part, shall

become effective on the first day, occurring not less than thirty days after the date of enactment of this part, which the Director of the Bureau of the Budget determines to be practicable.

REGIONAL BRANCHES OF THE NATIONAL LIBRARY OF MEDICINE

SEC. [378] *388.* (a) Whenever the Surgeon General, with the advice of the Board, determines that—

(1) in any geographic area of the United States, there is no regional medical library adequate to serve such area;

(2) under the criteria prescribed in section 398, there is a need for a regional medical library to serve such area; and

(3) because there is located in such area no medical library which, under the provisions of section 398, can feasibly be developed into a regional medical library adequate to serve such area,

he is authorized to establish, as a branch of the National Library of Medicine, a regional medical library to serve the needs of such area.

(b) For the purpose of establishing branches of the National Library of Medicine under this section, there are hereby authorized to be appropriated for each fiscal year, beginning with the fiscal year ending June 30, 1966, and ending with the fiscal year ending June 30, 1970, such sums, not to exceed $2,000,000 for any fiscal year, as may be necessary. Sums appropriated pursuant to this section for any fiscal year shall remain available until expended.

[PART I] *Part J*—ASSISTANCE TO MEDICAL LIBRARIES

DECLARATION OF POLICY AND STATEMENT OF PURPOSE

SEC. 390. (a) The Congress hereby finds and declares that (1) the unprecedented expansion of knowledge in the health sciences within the past two decades has brought about a massive growth in the quantity, and major changes in the nature of, biomedical information, materials, and publications; (2) there has not been a corresponding growth in the facilities and techniques necessary adequately to coordinate and disseminate among health scientists and practitioners the ever-increasing volume of knowledge and information which has been developed in the health science field; (3) much of the value of the ever-increasing volume of knowledge and information which has been, and continues to be, developed in the health science field will be lost unless proper measures are taken in the immediate future to develop facilities and techniques necessary to collect, preserve, store, process, retrieve, and facilitate the dissemination and utilization of, such knowledge and information.

(*b*) It is therefore the policy of this part to—

(1) assist in the construction of new, and the renovation, expansion, or rehabilitation of existing medical library facilities;

(2) assist in the training of medical librarians and other information specialists in the health sciences;

(3) assist, through [the awarding of special fellowships to physicians and other practitioners in the sciences related to health and scientists,] *grants to physicians and other practitioners in the sciences related to health, to scientists, and public or nonprofit private*

institutions on behalf of such individuals, in the compilation of existing, and the creation of additional, written matter which will facilitate the distribution and utilization of knowledge and information relating to scientific, social, and cultural advancements in sciences related to health;

(4) assist in the conduct of [research and investigations] *research, investigations, and demonstrations* in the field of medical library science and related activities, and in the development of new techniques, systems, and equipment for processing, storing, retrieving, and distributing information in the sciences related to health;

(5) assist in [improving] *establishing, improving,* and expanding the basic resources of medical libraries and related facilities;

(6) assist in the development of a national system of regional medical libraries each of which would have facilities of sufficient depth and scope to supplement the services of other medical libraries within the region served by it; and

(7) provide financial support to biomedical scientific publications.

DEFINITIONS

SEC. 391. As used in this part—

(1) the term "sciences related to health" includes medicine, osteopathy, dentistry, and public health, and fundamental and applied sciences when related thereto;

(2) the terms "National Medical Libraries Assistance Advisory Board" and "Board" mean the Board of Regents of the National Library of Medicine established under [section 373(a)] *section 383(a)* of this Act;

(3) the terms "construction" and "cost of construction", when used with reference to any medical library facility, include (A) the construction of new buildings, and the expansion, remodeling, and alteration of existing buildings, including architects' fees, but not including the cost of acquisition of land or off-site improvements, and (B) equipping new buildings and existing buildings (whether or not expanded, remodeled, or altered) for use as a library (including provision of automatic data processing equipment), but not with books, pamphlets, or related material;

(4) the term "medical library" means a library related to the sciences related to health.

NATIONAL MEDICAL LIBRARIES ASSISTANCE BOARD

SEC. 392. (a) The Board of Regents of the National Library of Medicine established pursuant to [section 373(a)] *section 383(a)* shall, in addition to its functions prescribed under [section 373,] *section 383* constitute and serve as the National Medical Libraries Assistance Advisory Board (hereinafter in this part referred to as the "Board").

(b) The Board shall—

(1) advise and assist the Surgeon General in the preparation of general regulations and with respect to policy matters arising in the administration of this part, and

(2) consider all applications for construction grants under this part and make to the Surgeon General such recommendations as it deems advisable with respect to (A) the approval of such applications, and (B) the amount which should be granted to each applicant whose application, in its opinion, should be approved.

(c) The Surgeon General is authorized to use the services of any member or members of the Board, in connection with matters related to the administration of this part, for such periods, in addition to conference periods, as he may determine.

(d) Appointed members of the Board who are not otherwise in the employ of the United States, while attending conferences of the Board or otherwise serving at the request of the Surgeon General in connection with the administration of this part, shall be entitled to receive compensation, per diem in lieu of subsistence, and travel expenses in the same manner and under the same conditions as that prescribed under [section 373(d),] *section 383(d)* when attending conferences, traveling, or serving at the request of the Surgeon General in connection with the administration of [part H which deals with the National Library of Medicine.] *part I.*

ASSISTANCE FOR CONSTRUCTION OF FACILITIES

SEC. 393. (a) In carrying out the purposes of section 390(b)(1), the Surgeon General may, upon application of any public or private nonprofit agency or institution, make grants to such agency or institution toward the cost of construction of any medical library facility to be constructed by such agency or institution.

(b) A grant under this section may be made only if the application therefor is recommended for approval by the Board and is approved by the Surgeon General upon his determination that—

(1) the application contains or is supported by reasonable assurances that (A) for not less than twenty years after completion of construction, the facility will be used as a medical library facility, (B) [subject to subsection (c),] sufficient funds will be available to meet the non-Federal share of the cost of constructing the facility, and (C) sufficient funds will be available, when construction is completed, for effective use of the facility for purpose for which it is being constructed;

(2) the proposed construction is necessary to meet the demonstrated needs for additional or improved medical library facilities in the community or area in which the proposed construction is to take place;

(3) the application contains or is supported by adequate assurance that any laborer or mechanic employed by any contractor or subcontractor in the performance of work on projects of the type covered by the Davis-Bacon Act, as amended, will be paid wages at rates not less than those prevailing on similar construction in the locality as determined by the Secretary of Labor in accordance with the Davis-Bacon Act, as amended (40 U.S.C. 276a–276a5). The Secretary of Labor shall have, with respect to the labor standards specified in this paragraph, the authority and functions set forth in Reorganization Plan Numbered 14 of 1950 (15 F.R. 3176; 64 Stat. 1267), and section 2 of the Act of June 13, 1934, as amended (40 U.S.C. 276c).

[(c) Within such aggregate monetary limit as the Surgeon General may prescribe, after consultation with the Board, applications which (solely by reason of the inability of the applicants to give the assurance required by clause (B) of subsection (b)(1)) fail to meet the requirements for approval set forth in subsection (b) may be approved upon condition that the applicants give the assurance required by such clause (B) within a reasonable time and upon such other reasonable terms and conditions as he may determine after consultation with the Board.]

[(d)] (*c*) In acting upon applications for grants under this section, the Board and the Surgeon General shall take into consideration the relative effectiveness of the proposed facilities in meeting demonstrated needs for additional or improved medical library services, and shall give priority to applications for construction of facilities for which the need is greatest.

[(e)] (*d*) The amount of any grant made under this section shall be that recommended by the Board or such lesser amount as the Surgeon General determines to be appropriate; except that in no event may such amount exceed 75 percentum of the necessary cost of the construction of such facility as determined by him.

[(f)] (*e*) Upon approval of any application for a grant under this section, the Surgeon General shall reserve, from any appropriation available therefore, the amount of such grant as determined under subsection (e), and shall pay such amount, in advance or by way of reimbursement, and in such installments consistent with construction progress, as he may determine. Such payments shall be made through the disbursement's facilities of the Department of the Treasury. The Surgeon General's reservation of any amount under this subsection may be amended by him, either upon approval of an amendment of the application or upon revision of the estimated cost of construction of the facility.

[(g)] (*f*) In determining the amount of any grant under this section, there shall be excluded from the cost of construction an amount equal to the sum of (1) the amount of any other Federal grant which the applicant has obtained, or is assured of obtaining, with respect to the construction which is to be financed in part by grants authorized under this section, and (2) the amount of any non-Federal funds required to be expended as a condition of such other Federal grant.

[(h)](*g*) If, within twenty years after completion of any construction for which funds have been paid under this section—

(1) the applicant or other owner of the facility shall cease to be a public or nonprofit institution, or

(2) the facility shall cease to be used for medical library purposes, unless the Surgeon General determines, in accordance with regulations prescribed by him after consultation with the Board, that there is good cause for releasing the applicant or other owner from the obligation to do so,

the United States shall be entitled to recover from the applicant or other owner of the facility the amount bearing the same ratio to the then value (as determined by agreement of the parties or by action brought in the United States district court for the district in which such facility is situated) of the facility, as the amount of the Federal participation bore to the cost of construction of such facility.

[(i)](*h*) For the purposes of carrying out the provisions of this section, there are hereby authorized to be appropriated for [each fiscal year, beginning with the fiscal year ending June 30, 1967, and ending with the fiscal year ending June 30, 1970, such sums, not to exceed $10,000,000 for any fiscal year, as may be necessary.] *the fiscal year ending June 30, 1971, $11,500,000; for the fiscal year ending June 30, 1972, $14,000,000; and for the fiscal year ending June 30, 1973, $16,500,000.*

GRANTS FOR TRAINING IN MEDICAL LIBRARY SCIENCES

SEC. 394. (a) [In order to enable the Surgeon General to carry out the purposes of section 390(b)(2), there are hereby authorized to be appropriated for each fiscal year, beginning with the fiscal year ending June 30, 1966, and ending with the fiscal year ending June 30, 1970, such sums, not to exceed $1,000,000 for any fiscal year, as may be necessary. Sums made available under this section shall be utilized by the Surgeon General in making grants—] *In order to enable the Secretary to carry out the purposes of section 390(b)(2), there are hereby authorized to be appropriated for the fiscal year ending June 30, 1971, $2,000,000; for the fiscal year ending June 30, 1972, $2,500,000; and for the fiscal year ending June 30, 1973, $3,000,000.*

(1) to individuals to enable them to accept traineeships and fellowships leading to postbaccalaureate academic degrees in the field of medical library science, in related fields pertaining to sciences related to health, or in the field of the communication of information;

(2) to individuals who are librarians or specialists in information on sciences relating to health, to enable them to undergo intensive training or retraining so as to attain greater competence in their occupations (including competence in the fields of automatic data processing and retrieval);

(3) to assist appropriate public and private nonprofit institutions in developing, expanding, and improving, training programs in library science and the field of communications of information pertaining to sciences relating to health; and

(4) to assist in the establishment of internship programs in established medical libraries meeting standards which the Surgeon General shall prescribe.

(b) Payment pursuant to grants made under this section may be made in advance or by way of reimbursement and in such installments as the Surgeon General shall prescribe by regulations after consultation with the Board.

ASSISTANCE [TO] FOR SPECIAL SCIENTIFIC [PROJECTS] PROJECTS, AND FOR RESEARCH AND DEVELOPMENT IN MEDICAL LIBRARY SCIENCE AND RELATED FIELDS

SEC. 395. (a) In order to enable the [Surgeon General] *Secretary* to carry out the purposes of section 390(b)(3), there are hereby authorized to be appropriated for each fiscal year, beginning with the fiscal year ending June 30, [1966,] *1971*, and ending with the fiscal year ending June 30, [1970,] *1973*, such sums, not to exceed $500,000 for any fiscal year, as may be necessary. Sums made available [under this section] *under this subsection* shall be utilized by the [Surgeon General

for the establishment of special fellowships to be awarded to physicians and other practitioners in the sciences related to health and scientists] *Secretary to make grants to physicians and other practioners in the sciences related to health, to scientists, and public or nonprofit private institutions on behalf of such individuals* for the compilation of existing, or writing of original, contributions relating to scientific, social, or cultural, advancements in sciences related to health. [In establishing such fellowships, the Surgeon General] *In making such grants, the Secretary* shall make appropriate arrangements whereby the facilities of the National Library of Medicine and the facilities of libraries of public and private nonprofit institutions of higher learning may be made available in connection with the projects for which such [fellowships are established] *grants are made.*

[RESEARCH AND DEVELOPMENT IN MEDICAL LIBRARY SCIENCE AND RELATED FIELDS]

[SEC. 396. (a)](*b*) In order to enable the [Surgeon General] *Secretary* to carry out the purposes of section 390(b)(4), there are hereby authorized to be appropriated for each fiscal year, beginning with the fiscal year ending June 30, [1966,] *1971*, and ending with the fiscal year ending June 30, [1970,] *1973*, such sums, not to exceed $3,000,000 for any fiscal year, as may be necessary. Sums made available [under this section] *under this subsection* shall be utilized by the [Surgeon General] *Secretary* in making grants to appropriate public or private nonprofit institutions and entering into contracts with appropriate persons, for purposes of carrying out projects of [research and investigations in the field of medical library science] *research, investigations, and demonstrations in the field of medical library science* and related activities and for the development of new techniques, systems and equipment, for processing, storing, retrieving, and distributing information pertaining to sciences related to health.

[(b)] (*c*) Payment pursuant to grants made under this section may be in advance or by way of reimbursement and in such installments as the Surgeon General shall prescribe by regulations after consultation with the Board.

GRANTS FOR [IMPROVING] ESTABLISHING, IMPROVING, AND EXPANDING THE BASIC RESOURCES OF MEDICAL LIBRARIES AND RELATED INSTRUMENTALITIES

SEC. [397] *396*. (a) In order to enable the [Surgeon General] *Secretary* to carry out the purposes of section 390(b)(5), there are hereby authorized to be appropriated for [each fiscal year, beginning with the fiscal year ending June 30, 1966, and ending with the fiscal year ending June 30, 1970, such sums, not to exceed $3,000,000 for any fiscal year, as may be necessary.] *the fiscal year ending June 30, 1971, $4,000,000; for the fiscal year ending June 30, 1972, $5,000,000; and for the fiscal year ending June 30, 1973, $6,000,000.*

(b) Sums made available under this section shall be utilized by the [Surgeon General] *Secretary* for making grants of money, materials, or both, to public or private nonprofit medical libraries and related scientific communication instrumentalities for the purpose of [expanding] *establishing, expanding* and improving their basic medical

library or related resources. The uses for which grants so made may be employed include, but are not limited to, the following: (A) acquisition of books, journals, photographs, motion picture and other films, and other similar materials, (B) cataloging, binding, and other services and procedures for processing library resource materials for use by those who are served by the library or related instrumentality, and (C) acquisition of duplication devices, facsimile equipment, film projectors, recording equipment, and other equipment to facilitate the use of the resources of the library or related instrumentality by those who are served by it, and (D) introduction of new technologies in medical librarianship.

(c)(1) The amount of any grant under this section to any medical library or related instrumentality shall be determined by the Surgeon General on the basis of the scope of library or related services provided by such library or instrumentality in relation to the population and purposes served by it. In making a determination of the scope of services served by any medical library or related instrumentality, the Surgeon General shall take into account the following factors—

(A) the number of graduate and undergraduate students making use of the resources of such library or instrumentality;

(B) the number of physicians and other practitioners in the sciences related to health utilizing the resources of such library or instrumentality;

(C) the type of supportive staffs, if any, available to such library or instrumentality;

(D) the type, size, and qualifications of the faculty of any school with which such library or instrumentality is affiliated;

(E) the staff of any hospital or hospitals or of any clinic or clinics with which such library or instrumentality is affiliated; and

(F) the geographic area served by such library or instrumentality and the availability, within such area, of medical library or related services provided by other libraries or related instrumentalities.

(2) In no case shall any grant under this section to a medical library or related instrumentality [during] *for* any fiscal year exceed [$200,000, or, if lesser, an amount equal to—] *$200,000; and grants to such medical libraries or related instrumentalities shall be in such amounts as the Secretary may by regulation prescribe with a view to assuring adequate continuing financial support for such libraries or instrumentalities from other sources during and after the period for which Federal assistance is provided.*

[(A) 60 per centum of the annual operating expenses of such library or related instrumentality, if such fiscal year is the first fiscal year with respect to which a grant under this section is made to it;

(B)(i) 50 per centum of the annual operating expenses of such library or related instrumentality, (ii) or, if lesser, five-sixths of the amount of its first year grant under this section, if such year is the second fiscal year with respect to which a grant under this section has been made to it;

(C)(i) 40 per centum of the annual operating expenses of such library or related instrumentality, (ii) or, if lesser, four-fifths of the amount of the second year grant under this section, if such

year is the third fiscal year with respect to which a grant under this section has been made to it;

(D)(i) 30 per centum of the annual operating expenses of such library or related instrumentality, (ii) or, if lesser, three-fourths of the amount of the third year grant under this section, if such year is the fourth fiscal year with respect to which a grant under this section has been made to it; and

(E)(i) 20 per centum of the annual operating expenses of such library or related instrumentality, (ii) or, if lesser, two-thirds of the amount of the fourth year grant under this section, if such year is the fifth fiscal year with respect to which a grant under this section has been made to it.

The "annual operating expense" of a library or related instrumentality shall, for purposes of the preceding sentence, be an amount equal (if such annual operating expense is to be determined with respect to the first grant to be made to such library or instrumentality under this section) to the amount of the average of the annual operating expenses of such library or instrumentality over the three fiscal years preceding the year in which such grant is applied for; and if such library or related instrumentality has been operating for less than three years prior to applying for such grant, its "annual operating expense" shall be an amount determined by the Surgeon General pursuant to regulations prescribed by him. For the second or succeeding fiscal year in which a grant is made to a library or related instrumentality, the "annual operating expense" of such library or related instrumentality shall, for purposes of such sentence, be equal to its operating expense (exclusive of Federal financial assistance under this part) for the preceding fiscal year.]

GRANTS FOR ESTABLISHMENT OF REGIONAL MEDICAL LIBRARIES

SEC. [398] *397*. (a) In order to enable the [Surgeon General] *Secretary* to carry out the purposes of section 390(b)(6), there are hereby authorized to be appropriated for [each fiscal year, beginning with the fiscal year ending June 30, 1966, and ending with the fiscal year ending June 30, 1970, such sums, not to exceed $2,500,000 for any fiscal year, as may be necessary] *the fiscal year ending June 30, 1971, $3,000,000; for the fiscal year ending June 30, 1972, $4,000,000; and for the fiscal year ending June 30, 1973, $5,000,000*. Sums made available under this section shall be utilized by the [Surgeon General,] *Secretary*, with the advice of the Board, to make grants to existing public or private nonprofit medical libraries so as to enable each of them to serve as the regional medical library for the geographical area in which it is located.

(b) The uses for which grants made under this section may be employed include, but are not limited to, the following—

(1) acquisition of books, journals, and other similar materials;

(2) cataloging, binding, and other procedures for processing library resource materials for use by those who are served by the libarary;

(3) acquisition of duplicating devices and other equipment to facilitate the use of the resources of the library by those who are served by it;

(4) acquisition of mechanisms and employment of personnel for the speedy transmission of materials from the regional library to local libraries in the geographic area served by the regional library; [and]

(5) planning for services and activities under this section; and

[(5)] *(6)* construction, renovation, rehabilitation, or expansion of physical plant considered necessary by such library to carry out its proper functions as a regional library.

(c)(1) Grants under this section shall be made only to medical libraries which agree [(A) to modify and increase their library resources so as to be able to provide supportive services to other libraries in the region as well as individual users of library services], *(A) to modify and increase their library resources and to supplement the resources of cooperating libraries in the region so as to be able to provide adequate supportive services to all libraries in the region as well as to individual users of library services,* (B) to provide free loan services to qualified users, and make available photoduplicated or facsimile copies of biomedical materials which qualified requests may retain.

(2) The Surgeon General, in awarding grants under this section, shall give priority to medical libraries having the greatest potential of fulfilling the needs for regional medical libraries. In determining the priority to be assigned to any medical library, he shall consider—

[(A) the need of such library, as determined by the levels of research, teaching, and medical activities of the library in relation to other existing library and medical communication services in the region;]

[(B)] *(A)* the adequacy of the library (in terms of collections, personnel, equipment, and other facilities) as a basis for a regional medical library; and

[(C)] *(B)* the size and nature of the population to be served in the region in which the library is located.

(d) Grants under this section for construction, renovation, rehabilitation, or expansion of physical plant shall be made in the same manner and subject to the same conditions as are provided for grants made under section 393, except that the eligibility for any such grant would be determined on the basis of the construction requirements of the library so as to be able to serve as a regional medical library. Grants under this section for basic resource materials to a library may not exceed 50 per centum of the library's annual operating expense (exclusive of Federal financial assistance under this part) for the preceding year; or in case of the first year in which the library receives a grant under this section for basic resource materials, 50 per centum of its average annual operating expenses over the past three years (or if it has been in operation for less than three years, its annual operating expenses determined by the Surgeon General in accordance with regulations prescribed by him).

(e) Payment pursuant to grants made under this section may be made in advance or by way of reimbursement and in such installments as the Surgeon General shall prescribe by regulations after consultation with the Board.

(f) The Secretary may also carry out the purposes of this section through contracts as well as grants, and such contracts shall be subject to the same limitations as are provided in this section for grants.

FINANCIAL SUPPORT OF BIOMEDICAL SCIENTIFIC PUBLICATIONS

SEC. [399.] *398.* (a) In order to enable the [Surgeon General] *Secretary* to carry out the purposes of section 390(b)(7), there are hereby authorized to be appropriated for each fiscal year, beginning with the fiscal year ending June 30, [1966,] *1971*, and ending with the fiscal year ending June 30, [1970], *1973*, such sums, not to exceed $1,000,000 for any fiscal year, as may be necessary. Sums made available under this section shall be utilized by the [Surgeon General] *Secretary*, with the advice of the Board, in making grants to, and entering into appropriate contracts with, public or private nonprofit institutions of higher education and individual scientists for the purpose of supporting biomedical scientific publications of a nonprofit nature and to procure the compilation, writing, editing, and publication of reviews, abstracts, indices, handbooks, bibliographies, and related matter pertaining to scientific works and scientific developments.

(b) Grants under this section in support of any single periodical publication may not be made for more than three years.

(c) Payment pursuant to grants made under this section may be made in advance or by way of reimbursement and in such installments as the Surgeon General shall prescribe by regulations after consultation with the Board.

CONTINUING AVAILABILITY OF APPROPRIATED FUNDS

SEC. [399a.] *399.* Funds appropriated to carry out any of the purposes of this part for any fiscal year shall remain available for such purposes for the fiscal year immediately following the fiscal year for which they were appropriated. *Funds appropriated under this part for grants for construction shall remain available until expended.*

RECORDS AND AUDIT

SEC. [399b.] *399a.* (a) Each recipient of a grant under this part shall keep such records as the Surgeon General shall prescribe, including records which fully disclose the amount and disposition by such recipient of the proceeds of such grant, the total cost of the project or undertaking in connection with which such grant is given or used, and the amount of that portion of the cost of the project or undertaking supplied by other sources, and such other records as will facilitate an effective audit.

(b) The Secretary of Health, Education, and Welfare and the Comptroller General of the United States, or any of their duly authorized representatives, shall have access for the purpose of audit and examination to any books, documents, papers, and records of such recipients that are pertinent to any grant received under the provisions of this part.

SEC. 399b. (a) Notwithstanding any other provision of this part, whenever there is appropriated any amount for any fiscal year (beginning with the fiscal year ending June 30, 1971) to carry out any particular program or activity authorized by this part, the Secretary shall have the authority to transfer sums from such amount, for the purpose of carrying out one or more of the other programs or activities authorized by their part; except that—

(1) the aggregate of the sums so transferred from any such amount shall not exceed 10 per centum thereof,

(2) the aggregate of the sums so transferred to carry out any such program or activity for any fiscal year shall not exceed 20 per centum of the amount appropriated to carry out such program or activity for such year, and

(3) sums may not be transferred for any fiscal year to carry out any such program or activity if such transfer would result in there being available (from appropriated funds plus the sums so transferred) to carry out such program or activity for such year amounts in excess of the amounts authorized to be appropriated for such year to carry out such program or activity.

(b) Any sums transferred pursuant to subsection (a) for any fiscal year for the purpose of carrying out any program or activity shall remain available for such purpose to the same extent as are funds which are specifically appropriated for such purpose for such year.

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